ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. S 120.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Daniel D. Ryan (29,243) John M. Manion (38,957) Daniel R. Johnson (46,204) Laura A. Dable (46,436) Joseph A. Kromholz (34,204)
Patricia Jones (46,318)
Arnold J. Ericsen (16,879)
Patricia A. Limbach (P-50,295)

(check the following item, if applicable)

[] Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor	r	
James	<i>(</i>) . A	Brady, M.D.
(GIVEN NAME)	(MIDDE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature	Jun /	
Date 3/28/02	Ountry of Citizenship	US
Residence (City, State/Country)		South Hampton, New York
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Full name of second joint inventor	or if any	
James	or, ir arry	Winchester, M.D.
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature	De Form	`
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Vadim (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	Davankov FAMILY (OR LAST NAME)
Inventor's signature	(MIDDLE INTIAL OR NAME)	PAMILT (OR LAST NAME)
Inventor's signature	Country of Citizenship	Russia
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Post Office Address Lening		gradskoe Shosse 112/1,k.3 kv.825
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Maria (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	Tsyurupa FAMILY (OR LAST NAME)
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Post Office Address		Serafimovicha 2-230
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Full name of fifth joint inventor, it	f any	
Ludmila (GIVEN NAME)	(MIDDLE INITIAL CONTACT)	Pavlova Pavlova
Inventor's signature	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
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Residence (City, State/Country)	_ Country of Orazonship	Moscow, Russia
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Full name of sole or first inventor		
_James	A	Brady, M.D.
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Post Office Address		80 Sanford Place
Post Office Address		South Hampton, New York 11968
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Full name of second joint inventor	or, if any	
_James	F	Winchester, M.D.
(GIVEN NAME)	(MIDDLE INITIAL OS NAME)	FAMILY (OR LAST NAME)
Inventor's signature Date 3 \ \frac{1}{12- 02- }	Cer Service	
Date3\2~\02	Country of Citizenship	US
Residence (City, State/Country)_		New York, New York
Post Office Address		200 East 64 Street, #16B
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Full name of third joint inventor, i	if any	
Vadim		Davankov
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
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Residence (City, State/Country)		Moscow, Russia
Post Office Address		gradskoe Shosse 112/1,k.3 kv.825
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Full name of fourth joint inventor Maria	, if any	-
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	Tsyurupa FAMILY (OR LAST NAME)
Inventor's signature	(MIDDLE INITIAL OR MAME)	FAMILY (OR LAST NAME)
Date	Country of Citizenship	Russia
Residence (City, State/Country)		Moscow , Russia
Post Office Address		Serafimovicha 2-230
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(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	Pavlova FAMILY (OR LAST NAME)
Inventor's signature	(MIDDLE MITTAL OR NAME)	PAWILT (UK LAST NAIVE)
Date	Country of Citizenship	Russia
Residence (City, State/Country)		Moscow, Russia
Post Office Address		Zemlyanoi Vat2/50-64
. 55. 51100 /100/633		Moscow 103064, Russia
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(GIVEN NAME) AND COUNTRY OF CITIZENSHIP AND CITIZENSHIP AND COUNTRY OF COUNTRY	Full name of sole or first inventor	r	
GIVEN NAME GAME	James	. Δ	Brady M.D.
Inventor's signature Date Country of Citizenship US Residence (City, State/Country) Rost Office Address South Hampton, New York 80 Sanford Place South Hampton, New York 11968 Full name of second joint inventor, if any James (GIVEN NAME) Inventor's signature Date 3/21/01— Country of Citizenship Residence (City, State/Country) Residence (City, State/Country) Full name of third joint inventor, if any Vadim (GIVEN NAME) (GIVEN NAME) (GIVEN NAME) (MIDDLE INITIAL OR NAME) Post Office Address Leningradskoe Shosse 112/1,k.3 kv.825 Moscow. Russia Full name of fourth joint inventor, if any Maria (GIVEN NAME) (GIVEN		(MIDDLE INITIAL OR NAM	E) FAMILY (OR LAST NAME)
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Full name of fourth joint inventor, if any Maria (GIVEN NAME) Inventor's signature Date Country of Citizenship Residence (City, State/Country) Post Office Address Full name of fifth joint inventor, if any Ludmila (GIVEN NAME) (MIDDLE INITIAL OR NAME) (MIDDLE INITIAL OR NAME) Family (OR LAST NAME) Moscow, Russia Serafimovicha 2-230 Moscow 109072, Russia Full name of fifth joint inventor, if any Ludmila (GIVEN NAME) (GIVEN NAME) Inventor's signature Date Country of Citizenship Russia Residence (City, State/Country) Moscow, Russia Residence (City, State/Country) Moscow, Russia Residence (City, State/Country) Moscow, Russia Residence (City, State/Country) Zemlyanoi Vat2/50-64	Post Office Address	Ler	
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WONDER TO THE TOTAL REPORTS			Moscow 103064, Russia

Full name of sole or first invented	or	
James	Α	Brady, M.D.
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature		
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Residence (City, State/Country)	<u> </u>	South Hampton, New York
Post Office Address		80 Sanford Place
		South Hampton, New York 11968
		Godan Hampton, New York 11900
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Full name of second joint inven-	tor if any	
James	tor, ir arry	140 1 14 14 14 15
(GIVEN NAME)	- /MIDDLETNITYAL-90 MAME)	Winchester, M.D. FAMILY (OR LAST NAME)
Inventor's signature		PAINILY (OR LAST NAME)
Inventor's signature Date 3 T- 02	Country of Citizenship	US
Residence (City State/Country)		
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Full name of third initial	! f	
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(GIVEN NAME)	ANDOLE BUTTLE CONTINUES	Davankov
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Date <u>03/29/02</u>	(MIDDLE INITIAL OR NAME) Country of Citizenship	Dugaia
Residence (City State) Country	Country of Citizenship	Russia
Residence (City, State/Country) Post Office Address		Moscow , Russia
rost Office Address		Serafimovicha 2-230
		Moscow 109072, Russia
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Full name of fifth joint inventor,	if any	
Ludmila		Pavlova
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature ///	asur)	
Date <u>03/29/02</u>	_ Country of Citizenship	Russia
Residence (City, State/Country)		Moscow, Russia
Post Office Address		Zemlyanoi Vat2/50-64
		Moscow 103064 Russia

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

[X]	Signature for sixth and subsequent joint inventors. Number of pages added1
	* * *
[]	Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added
	* * *
[]	Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added
	* * *
[X]	Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application.
	[X] Number of pages added2.
	* * *
[]	Authorization of attorney(s) to accept and follow instructions from representative
	* * *
	(If no further pages form a part of this declaration then end this declaration with this page and check the following item:)
	[] This declaration ends with this page

Full name of sixth joint inver	ntor, if any	
Frank	M	Norris
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature	// now	110
Date 3/22/02	Country of Citizenship	US Varia Navi Varia
Residence		New York, New York
Post Office Address		325 East 64 Street, #507
		New York, New York 10021
Full name of seventh joint in Peter (GIVEN NAME) Inventor's signature Date 3-22-02 Residence Post Office Address	(MIDDLE INDIAL OR NAME) Country of Citizenship	Quartararo, Jr. FAMILY (OR LAST NAME) US New York, New York 320 East 65 Street, #321 New York, New York 10021
		New Tolk, New Tolk 10021
Full name of eighth joint inv	ventor, if any	
Jamie	A	Salsberg Salsberg
(GIVEN NAME) Inventor's signature	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Date 3/22/02	Country of Citizenship	US
Residence		New York, New York
Post Office Address	A STATE OF THE STA	401 East 34 Street # S6K
. Cot Office Address		New York, New York 10016
		TACAL LOLD LACAL LOLD LOCAL



ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION

(complete this part only if this is a divisional, continuation or C-I-P application)

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, S 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, S 112, I acknowledge the duty to disclose information that is material to the examination of this application, namely, information where there is substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 120:

Status (CHECK ONE)

U.S. APPLICATIONS	U.S. FILING DATE	Patented	Pending	Abandoned
1. 0 9 /832,159	04/10/2001		X	
2. 0 9/829,252	04/10/2001		X	
3. 0 9 /294,224	04/19/1999		X	_
4. 08/902,727	07/30/1997	X		

PCT APPLICATIONS DESIGNATING THE U.S.

PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NOS. ASSIGNED (if any)
4		
5.		
6		

35 USC 119 PRIORITY CLAIM, IF ANY, FOR ABOVE LISTED U.S./PCT APPLICATIONS

DETAILS OF FOREIGN APPLICATION FROM WHICH PRIORITY APPLICATION CLAIMED UNDER 35 USC 119

Above Appln. No.	Country	Application No.	Date of filing (day, month, year)	Date of issue (day, month, year)
1.				
2.				
3.				
4.				
5			-	
6				



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Brady et al.

Group No.: Unknown

Serial No.: 10/036,732

Examiner: Unknown

Filed: 21 December 2001

For:

Devices, Systems, and Methods for Reducing Levels of Pro-Inflammatory or Anti-Inflammatory Stimulators or Mediators in the Blood, Generated as a Result of Extracorporeal Blood

Processing

Commissioner of Patents Washington, D.C. 20231

STATEMENT BY ATTORNEY THAT APPLICATION FILED IN PTO IS THE ONE INVENTOR(S) EXECUTED BY SIGNING DECLARATION

I, <u>Daniel D. Ryan</u> , Registration No. <u>29,243</u> , of F	RYAN KROMHOLZ & MANION, S.C., P.O. Box
26618, Milwaukee, Wisconsin 53226-0618, {(262) 783-	.1300} state I am an attorney for this application
and the application identified above is the application	which the inventor(s) executed by signing the
declaration which is being submitted herewith.	
	DD-

CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this paper (along with any paper referred to	o as being attached or	r enclosed) is being deposited with t	he
United States Postal Service on the date shown below with sufficient p			
Commissioner of Patents and Trademarks, Washington, D.C. 20231.	\		

Date 18 April 2002

, fillet vinano

(Typed Name of Person Signing Paper)